

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

File with:
 Iowa Ethics and Campaign
 Disclosure Board
 510 E. 12th, Ste. 1A
 Des Moines, Iowa 50319
 Fax 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

IA ETHICS AND
 CAMPAIGN DISCLOSURE

2010 MAY 19 AM 11:17

COMMITTEE NAME (Must be same as on Statement of Organization)

BULL FOR COUNTY ATTORNEY

IMPORTANT: Indicate by # type of committee you are reporting for: 5

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
 (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
 Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC
 (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Ed Bull

Political Party (if applicable)

Republican

Office Sought

Marion County Attorney

District (if Senate or House)

FORM

DR-2

(Rev. 12/2009)

DISCLOSURE
 REPORT

For Office Use Only

Comm. #

Logged in

Scanned

Computer

Audited

18480

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

SIGNATURE OF PERSON FILING REPORT

515-848-3211

TELEPHONE

5-19-2010

DATE SIGNED

I AM FILING A May 14, 2010

(report date)

REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
 (You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in
 which Election is held
 Marion

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 1,327.06

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below)

2,970.00

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ 4,297.06

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

1,819.30

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$ 2,377.76

**UNPAID BILLS (From Schedule D - Attach Schedule D)

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$ 150.00

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Resc. Form

CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONEY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)**BULL FOR COUNTY ATTORNEY**

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
03/20/2010	ID# CK#	Robert C. Gaincr, 129 27th Ct., West Des Moines, Iowa 50265		\$100.00	<input type="checkbox"/>
04/05/2010	ID# CK#	Gordon Gratias, 505 5th Ave, Des Moines, Iowa 50309		100.00	<input type="checkbox"/>
04/05/2010	ID# CK#	Ryan Ellis, 1106 N. 9th, Indianola, Iowa 50125		100.00	<input type="checkbox"/>
04/05/2010	ID# CK#	Unitemized Cash Donation		20.00	<input type="checkbox"/>
04/10/2010	ID# CK#	Kimberly Stamatelos, 2700 Westown Parkway, #220, West Des Moines, Iowa 50265		25.00	<input type="checkbox"/>
04/10/2010	ID# CK#	Gordon Blacksmith, 506 W. Jackson, Indianola, Iowa 50125		25.00	<input type="checkbox"/>
04/10/2010	ID# CK#	Marty Helle, 1104 Sixth Ave, N.W. Austin, Minnesota, 55912		25.00	<input type="checkbox"/>
04/10/2010	ID# CK#	Tom Berg, 2423 Ingersoll Ave, Des Moines, Iowa 50312		50.00	<input type="checkbox"/>
04/17/2010	ID# CK#	Jim Hicks, 109 N. 3rd, Knoxville, Iowa, 50138		50.00	<input type="checkbox"/>
04/19/2010	ID# CK#	Amy Noble, 10263 N.W. Beaver, Johnston, Iowa 50131		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 595.00	
TOTAL (if last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 4
(for Schedule A)

For Instructions, See Back of Form


CONTRIBUTIONS -- MONEY TAKEN IN
 (Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
BULL FOR COUNTY ATTORNEY

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4/19/2010	ID# CK#	VccAnn Cartwright, 4216 92nd Court, Urbandale, Iowa 50322		\$25.00	<input type="checkbox"/>
4/19/2010	ID# CK#	Jured Harmon, 7500 Canterbury Rd, #71, Urbandale, Iowa 50322		100.00	<input type="checkbox"/>
4/26/2010	ID# CK#	Jon Anderson, 702 NE Castleton Ct., Ankeny, Iowa 50021		25.00	<input checked="" type="checkbox"/>
4/26/2010	ID# CK#	Gary Dickey, Jr. 3201 Watrous Ave, Des Moines, Iowa 50321		300.00	<input checked="" type="checkbox"/>
4/26/2010	ID# CK#	Gary Dickey, Sr. 3607 SE 18th Ct, Des Moines, Iowa 50320		200.00	<input checked="" type="checkbox"/>
4/26/2010	ID# CK#	Joseph L Walsh, 929 30th, Des Moines, Iowa 50312		200.00	<input checked="" type="checkbox"/>
4/26/2010	ID# CK#	Dusky Terry, 355 NW Locust, Earlham, Iowa, 50072		50.00	<input checked="" type="checkbox"/>
4/26/2010	ID# CK#	Kathryn Miller, 3727 Park Avenue, Des Moines, Iowa, 50321		40.00	<input checked="" type="checkbox"/>
4/26/2010	ID# CK#	John Burns, 5763 Chatham Cir., Johnston, Iowa 50131		50.00	<input checked="" type="checkbox"/>
4/26/2010	ID# CK#	Nat Tagtow, 1900 High St., #E316, Des Moines, Iowa 50309		50.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 1040.00	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form


CONTRIBUTIONS -- MONEY TAKEN IN
 (Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
BULL FOR COUNTY-ATTORNEY

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
4/26/2010	ID# CK#	Nicole Nolan, 1665 NW 123rd, Clive, Iowa 50325		\$40.00	<input checked="" type="checkbox"/>
4/26/2010	ID# CK#	Carla Bass, 6575 NW 54th Ct., Johnston, Iowa		20.00	<input checked="" type="checkbox"/>
4/26/2010	ID# CK#	Andrea Flanagan, 3313 52nd, Des Moines, Iowa 50313		150.00	<input checked="" type="checkbox"/>
4/26/2010	ID# CK#	Angela Campbell, 1006 42nd, Des Moines, Iowa 50311		100.00	<input checked="" type="checkbox"/>
4/26/2010	ID# CK#	Todd E. Babich, 100 Court Avenue, Suite 401, Des Moines, Iowa 50309		100.00	<input checked="" type="checkbox"/>
4/26/2010	ID# CK#	Robert Josten, 801 Grand, #3900, Des Moines, Iowa 50309		100.00	<input checked="" type="checkbox"/>
4/26/2010	ID# CK#	Faye Jenkins, 5810 Ingersoll Avenue, Des Moines, Iowa 50312		100.00	<input checked="" type="checkbox"/>
4/26/2010	ID# CK#	Jesse Macro, 3737 Westown Parkway, Ste 2d, West Des Moines, Iowa 50266		75.00	<input checked="" type="checkbox"/>
4/27/2010	ID# CK#	Bryan Webber, 1101 11st, #203, West Des Moines, Iowa 50265		25.00	<input type="checkbox"/>
4/27/2010	ID# CK#	Daniel Rothman, 4619 NE McDougal, Ankeny, Iowa 50021		50.00	<input type="checkbox"/>
SUB-TOTAL				\$ 760.00	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONEY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
BULL FOR COUNTY ATTORNEY

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
4/27/2010	ID# CK#	Alyssa Kenville, 508 53rd, West Des Moines, Iowa 50266		\$100.00	<input type="checkbox"/>
5/1/2010	ID# CK#	Samuel McHard, 389 Pittman Rd., Ellisville, Mississippi, 39437		100.00	<input type="checkbox"/>
5/2/2010	ID# CK#	Dr. Michael Macke, 2855 Wildflower Rd., Cedar Rapids, Iowa 52411		200.00	<input type="checkbox"/>
5/5/2010	ID# CK#	Gerald Feuerhelm, 3910 SW Sawgrass Pkwy, Ankeny, Iowa 50023		75.00	<input type="checkbox"/>
5/6/2010	ID# CK#	Bill Nyc, 144 Geneva, Pleasantville, Iowa 50025		100.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 575.00	
TOTAL (if last page of this schedule)				\$ 2970.00	

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FOR INSTRUCTIONS, SEE BACK OF FORM

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

BULL FOR COUNTY ATTORNEY

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
2/28/2010	ID# CK# 106	Office Max, 5020 SE 14th, Des Moines, Iowa 50320	Stickers/Posters	\$ 8.49
3/11/2010	ID# CK# 107	Pella Chronicle, 812 Main Steet, Pella, Iowa, 50219	Internet Advertising	150.00
3/11/2010	ID# CK# 108	Ed Bull, 3005 E. Kenyon, Des Moines, Iowa 50320	Stamps - Reimbursement	88.00
3/11/2010	ID# CK# 109	Marion County Iowa, Marion County Courthouse - Auditors Office	Printing/Proccsssing Fecs, RE: 2008 Primary Voter Logs	10.00
3/26/2010	ID# CK# 110	Carter Printing, 1739 East Grand, Des Moines, Iowa 50316	Brochures	670.50
4/26/2010	ID# CK# 111	Allegra Printing, 1000 Thomas Beck Road, Des Moines, Iowa 50315	Stickers	72.92
5/6/2010	ID# CK# 112	Ed Bull, 3005 E Kenyon, Des Moines, Iowa 50320	Campaign Signs-Reimbursement	790.59
5/10/2010	ID# CK# 113	Menards, 6000 SE 14th, Des Moines, Iowa 50320	Yard Stakes for Signs	28.80
SUB-TOTAL				\$ 1819.30
TOTAL (If last page of this schedule)				\$ 1819.30

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(j).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)
BULL FOR COUNTY ATTORNEY



SCHEDULE E (Rev. 08/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
4/26/2010	Gary Dickey, Jr., 3201 Watrous, Des Moines, Iowa, 50321		Food and Beverage for Fundraiser	\$ 150.00	<input checked="" type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 150.00	
TOTAL (if last page of this schedule)				\$ 150.00	

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule E)